MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/599967

FILING DATE 2/31/07

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
4		/					54						
5		/					55						
6	/						56						
7	/	/					57						
8		/					58						
9		/					59						
10		/					60						
11	/						61						
12	/						62						
13	/		/				63						
14				/			64						
15				/			65						
16				/			66						
17				/			67						
18			/				68						
19				0			69						
20				0			70						
21				0			71						
22				0			72						
23			/				73						
24			/				74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	4		4				TOTAL IND.						
TOTAL DEP.	8		8				TOTAL DEP.						
TOTAL CLAIMS	12		12				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)